Edgar Filing: SHUTTERFLY INC - Form 4

SHUTTERI	FLY INC												
Form 4													
May 19, 20	16												
FORM	ЛЛ								OMB AF	PROVAL			
	UNITED	STATES		RITIES A			NGE CO	OMMISSION	OMB Number:	3235-0287			
Check t				0	,				Expires:	January 31,			
if no longer subject to STATEMENT OF CHAN				NGES IN BENEFICIAL OWNERSHIP					•	2005			
Section 16.				SECURITIES					Estimated average burden hours per				
Form 4	or								response	0.5			
Form 5	Filed pur	suant to S	Section	16(a) of th	he Securi	ties E	xchange	Act of 1934,					
obligation may cor				•	•			1935 or Section					
<i>See</i> Inst 1(b).		30(h)	of the I	nvestmen	t Compai	ny Ac	t of 1940						
	-												
(Print or Type	Responses)												
1. Name and	Address of Reporting	Person [*]	2. Issue	er Name an	d Ticker or	Tradi	ng É	5. Relationship of I	p of Reporting Person(s) to				
BORIS JOHN Symbol								Issuer					
				TTERFLY INC [SFLY]				(Check all applicable)					
(Last)	(First) (I	Middle)	3. Date of	of Earliest T	ransaction			Спеск	an applicable)			
			(Month/	Day/Year)			_	Director		Owner			
C/O SHUT	TERFLY, INC., 2	2800	05/17/2	2016				_X_ Officer (give t below)	title Other below)	er (specify			
BRIDGE P	PARKWAY						ı	· · · · · · · · · · · · · · · · · · ·	f Marketing Of	fficer			
	(Street)		4 If Am	endment D	ate Origina	1	é	6 Individual or Ioi	nt/Group Filin	o(Check			
				-				6. Individual or Joint/Group Filing(Check Applicable Line)					
							-	_X_ Form filed by O					
REDWOO	D CITY, CA 9400	65						Form filed by Mo Person	ore than One Re	porting			
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Secur	ities Acqui	ired, Disposed of,	or Beneficial	ly Owned			
1.Title of	2. Transaction Date	2A. Deem	ed	3.			quired (A)	5. Amount of	6.	7. Nature of			
Security	(Month/Day/Year)	Execution	Date, if	Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities	Ownership	Indirect			
(Instr. 3)		any (Month/Da	av/Vear)					Beneficially Owned	Form: Direct (D)	Beneficial Ownership			
		(WOILD)	ay/ i cai)	(11301.0)				Following	or Indirect	(Instr. 4)			
						(A)		Reported	(I)				
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)				
				Code V	Amount	(D)	Price	(insu: 5 and 4)					
Common Stock	05/17/2016			S <u>(1)</u>	15,085	D	\$ 46.5636	5,519	D				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BORIS JOHN C/O SHUTTERFLY, INC. 2800 BRIDGE PARKWAY REDWOOD CITY, CA 94065			SVP, Chief Marketing Officer					
Signatures								
/s/ Ray Amanquah, Attorney-in-Fact		05/19/2016						
**Signature of Reporting Person		Date						

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Represents shares sold to cover taxes due upon vesting and settlement of restricted stock units granted to the Reporting Person on April 23, 2012.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.